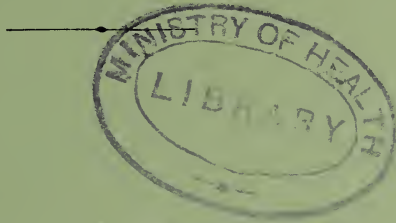


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RURAL DISTRICT OF CHAILEY



Annual Report

of the

Medical Officer of Health

for the

Year Ended 31st December, 1953

Public Health Department,
Lewes House,
LEWES, Sussex.
October, 1954.

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Charles Clarke (Haywards Heath) Ltd.

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CHAILEY RURAL DISTRICT COUNCIL

PUBLIC HEALTH DEPARTMENT,
LEWES HOUSE,
LEWES.

October, 1954.

To the Chairman and Members of the Chailey Rural District Council.

MR. CHAIRMAN, MY LORDS, LADIES AND GENTLEMEN,

I have the honour to present the Annual Report on the health of the inhabitants and on the sanitary conditions of the Chailey Rural District for the year 1953.

The estimated population for 1953 of the district was 18,840. In 1944 the estimated population was 16,630. The increase of 2,210 in population from 1944 to 1953 was more due to the number of people who immigrated into the area which exceeded the number of those who emigrated out of it than to the excess of births over deaths in that time.

It is well known that fewer people are now able to retire at ages at which they were able to a few years ago. Taxation and the increased cost of living are partly to blame for this state of affairs. Nevertheless, this is only true generally throughout the whole country. The Rural District of Chailey has been a favourite place to retire to for very good reasons. An excellent climate with charming rural scenery, propinquity to the sea and for a change from secluded rural retreats journeys can be made by facilities existing for visits to large centres of population as nearby towns and the metropolis. Retired people and others have come to live in the rural district from all over the country and it would seem that this trend is continuing. At present housing development is particularly active in Peacehaven. In spite of deterrents to retirement at ages at which people were able to retire formerly the rural district still attracts immigrants into it and possibly will continue to do so in the future. Cognizance of an increasing population is an important point to bear in mind since many things are affected by it, such as housing, water supplies, sewage disposal and many other matters which fall to the lot of local government to deal with.

The crude birth rate for 1953 was 12.37 per 1,000 population. In order that the birth rate may be compared fairly with that of other areas and with that of England and Wales as a whole, a comparability factor was applied to the crude rate. This resulted in a comparable birth rate of 13.85 for the Rural District as against 15.5 for England and Wales for the same year.

The crude death rate was 18.89 per 1,000 population. This represented a total of 356 deaths of which 86 were deaths of people not Chailey residents who died in institutions in the area. The remaining 270 deaths were of Chailey residents and this gave a crude death rate of 14.33. The comparability factor applied to the latter crude rate gave a comparable death rate of 10.60 as compared with 11.4 for England and Wales for 1953.

No mothers died in or in consequence of childbirth during the year. The maternal mortality was thus nil. Only one maternal death has been recorded in the rural district in the last five years and the average annual maternal mortality for that period was 0.66 as compared with 0.82 for England and Wales for the same quinquennium. This is most gratifying and shows that the chances of mothers in your district dying in or in consequence of childbirth are very small. Great credit must be given to doctors and nurses associated with the care and management of mothers for the attainment of such a desirable state of affairs.

The Infantile Mortality Rate or the deaths of infants under one year of age per 1,000 live births for 1953 was 8.58 and this was less than one third of the rate 26.8 for England and Wales for the same year. This is very satisfactory and it is even more satisfactory to report that the Infantile Mortality Rate for 1953 for your Rural District was about one sixth of what it was in 1949. The fact that less children under one year of age are dying is due to the use of antibiotics and sulpha drugs. These drugs are most effective in the treatment of infectious diseases, lung diseases and diarrhoea which formerly caused considerable mortality. It is also due to a higher standard of child care. There will always be the odd death in some years from such causes as congenital defects, premature birth and the like, which give an infant very small chances of survival. It can be said that as far as your rural district is concerned the Infantile Mortality Rate has been reduced in recent years to the irreducible minimum.

Five deaths were notified during the year as being due to pulmonary tuberculosis. This gave a death rate of 0.26 per 1,000 population. In 1949 eleven deaths were recorded and the death rate was 0.54 per 1,000 population. In 1929 there were no less than 23 deaths, which gave a death rate of 1.74. These figures speak for themselves. The dramatic fall in the death rate is due to many factors such as more intensive case finding, the use of new drugs and anti-biotics, improved surgical technique, improved nutrition and better housing accommodation of infected cases. There has also been a shift in the ages at which death occurred. In 1929 no less than 16 of the total deaths were at ages from 10 years to 44 years ; in 1949 out of a total of 11 deaths 7 died at ages from 45 years to 65 years and over and in 1953 of the five deaths 4 were at ages from 45 years to 55 years. During the year under review there were no deaths from non-pulmonary tuberculosis. In the last five years there have been only three deaths from this cause, the same number as was recorded in one year 1933. The extension of T.T. herds, the elimination of tuberculous cattle and the pasteurisation of milk have all helped to reduce the death rate and the incidence of non-pulmonary tuberculosis since most of the cases in the past were caused through the consumption of infected milk.

The chief causes of death in 1953 were heart disease, cancer and vascular lesions of the nervous system, amounting to about 70% of the total deaths. Twenty years ago these three main causes were responsible for about 50% of the total deaths. The reason for the increase is two fold—a better control over the common infectious diseases and the increased longevity of the population. On the one hand infectious diseases are more easily prevented and cured, and on the other there are more people in the older age groups where heart disease, cancer and vascular lesions of the nervous system are more prone to occur.

The average age at death in the Chailey Rural District in 1953 was 72 years. The care of old people who cannot look after themselves is a problem which has been with us for many years. At present about 97 per cent of old people live independent lives and the remaining 3 per cent occupy accommodation in hospitals, mental hospitals, institutions or nursing homes. A sample from the 1951 Census showed that the proportion of men over 65 years and women over 60 years was 1 in 7 of the total population. Fifty years ago the proportion was 1 in 17 and since that time there has been a steady increase of old people due to the increased longevity. It is estimated that in 1977 the proportion of old people in the general population will be 1 in 5. If this assumption proves anywhere near the forecasted proportion, more accommodation for old people will be required by means of small dwellings for those who can live independent lives, where no place can be found for them with the younger members of their families or simply because they are unwanted by their younger relatives. It is certain that

there must be an increase in accommodation in hospitals and institutions and the like especially in hospitals for incurable cases as people reach higher ages in the future and the proportion of old people increases. Many of the elderly do not remain in a static state of health but hover between health and sickness and it is thus difficult to classify them at times as being sick or as being infirm and this problem is for a specially appointed geriatric physician. There should be also specially appointed medical officers and nurses to advise on the prevention of mental and physical deterioration in ageing people and this work should be carried out in the home. Where people retire and there is a sudden break in routine which can cause mental and physical deterioration, boredom and sense of uselessness have often precipitated the first fatal steps towards relinquishing a hold on life. Continuation in some sort of employment or hobby suitable to one's capabilities does much to maintain health.

Cases of infectious diseases in the Chailey Rural District in 1953 numbered 582 of which measles accounted for 370 cases and whooping cough for 179. The cases of measles had a mild form of the disease. The mortality from measles has declined during the last twenty years and nowadays it is very rare for a fatality to occur. Improved medication has brought about this result partly and it has also been contributed to by the mildness of the disease. Whooping cough has lost much of its severity through the use of anti-biotics and the fatality rate throughout the country is now very low. Immunisation against measles has given very doubtful results. There is now a prophylactic in use for immunisation against whooping cough and this has been adopted throughout the country. In experiments the prophylactic is said to have been most effective. The two diseases, measles and whooping cough, wax and wane from year to year as to the numbers of cases infected. Twelve cases of pneumonia were notified during the year. Two were admitted to hospital. Scarlet fever was notified in eleven cases, one of which was admitted to hospital for treatment. Most of the cases were of the mild type and there were no fatalities. This disease, which once caused a heavy death roll, has become a very much diminished hazard due to the use of sulpha drugs and anti-biotics in treatment. Deaths are now very rare and complications and residual disablements are warded off. Erysipelas cases amounted to four. About fifteen years ago five out of every hundred cases of erysipelas died. Treatment by chloram-phenicol and other anti-biotics has reduced the death rate to practically nil. Four cases of food poisoning were notified. They made quick recoveries. One case of meningococcal infection made a very good recovery after treatment. Only one case of dysentery was notified. During the year no case of diphtheria was notified. The last case notified was in 1949 in a child who had not been immunised against the disease. The freedom from diphtheria has amply proved the effectiveness of immunisation. No case of any of the infectious diseases notified in 1953 died.

Regarding the sanitary circumstances and sanitary inspection of the area samples of water taken from the main supplies of the six statutory authorities serving the area showed that in every case the quality of the water was most satisfactory. Water mains were extended at various places and a total of 4,641 linear yards of main were laid during the year. As in former years samples of water were taken from private sources. Two out of 14 such sources were found to be polluted, and as a result 12 dwellings were connected up with the main water supply after the service of formal notices. Other connections to the main were effected by informal action.

Sewage schemes were started at Beddingham, South Common and Wivelsfield. A Public Enquiry was held concerning a modified scheme at Plumpton, but so far no further progress has been made. At the time of writing notice

of agreement by the Ministry of Health to the drainage of Kingston has been received. The sewerage of Rodmell is still outstanding. It is incomprehensible why this latter scheme has not been agreed to by the Ministry. The present sewage disposal methods at Rodmell leave much to be desired. Much of the sewage drains into a roadside ditch in a practically raw state. This is a breach of Section 14 of the Public Health Act 1936. In October, 1951, a Public Enquiry was held concerning the matter, and so far no decision has been given by the Ministry. This delay has caused a good deal of irritation amongst the residents, and numerous complaints have been made regarding the delay. The filthy contaminated ditch is not only a nuisance owing to its smell and appearance, but is distinctly prejudicial to Public Health. The rural problem of sewage disposal is quite as important as the urban problem. There are three viewpoints to be considered in the disposal of human excreta: the hygienic, the aesthetic and the economic. The public health or hygienic point of view is concerned mainly with the fate of pathogenic organisms which may be contained in human wastes. The micro-organisms of typhoid fever, dysentery and certain other intestinal diseases have their ultimate source in human discharges and are conveyed from host to host through channels by water, food, soil or contact, sometimes by human agencies and sometimes by animals. Since wastes from households and industries must be disposed of ultimately on land or in water, the safe disposal of excreta requires that the methods chosen shall eliminate or at least minimise many dangers of pollution through water, food substances to be consumed raw, shellfish, and soil which may be handled. Consideration must be given to preventing a nuisance caused by decomposing sewage matters which become offensive and the aesthetic view of sewage disposal deals with the destruction of organic matter contained in the excreta and the prevention of offensive conditions. It demands that excreta be cared for in such a way that they will become neither unsightly nor objectionable to the sense of smell. The economic viewpoint concerns itself chiefly with the price that must be paid to secure the requirements of hygiene and aesthetics and with the possible damage to water supplies, fish and rivers. In some areas it deals with the utilisation of sewage disposal works products for fertilising purposes.

At present in the Chailey Rural District there are six large village sewage disposal works and forty-one smaller works. These have required a staff of men to ensure that adequate care is given so that the works are at all times satisfactory. As the works are placed at different points in a large area this has necessitated the use of transport and portable equipment.

During the year thirty-nine dwellings were brought up to a high standard of repair with appointments to compare favourably with the standard of new Council houses. Twelve were assisted by Improvement Grants under the 1949 Housing Act. There would appear to be a saving to the local authority by the use of Improvement Grants when the ultimate cost of a Council house is considered. There is a danger that a Council may find itself burdened for years by the cost of too many Council houses. It would seem reasonable to encourage greater use of Improvement Grants.

A caravan site of twenty acres to accommodate 120 caravans at Rushey Hill, Peacehaven, was purchased during the year and work was put in hand to develop it. The whole area of Peacehaven lends itself to the occupation of unauthorised sites by caravans, and it is hoped that with the completion of the camp this practice will cease. At present the work of development of the camp cannot be proceeded with until Ministerial approval is given to the expenditure entailed in the development.

Anthrax was found in a carcase at a knackers yard. Immediate advice was given on this being notified, and cleaning and disinfection of the premises, instruments, utensils and clothing, together with disposal of carcase, etc., were carried out without delay. No infection of any human beings occurred and the disease did not spread to other animals. Prompt application of health measures prevented the dissemination of the disease.

The appearance of hordes of caterpillars of the brown-tailed moth in Peacehaven and Telscombe Cliffs caused a good deal of alarm. Many complaints were made, and vigorous action was taken to suppress the pest by spraying with insecticide and cutting and burning the affected clumps of bramble and thorn bushes. The outbreak commenced in early May and by the end of July, after constant work of eradication, the pest war ended. The cost of the whole operation was considerable, and it may be necessary in future years to carry out similar methods of eradication. A great deal depends upon the temperature, humidity and the presence of bacteria inimical to the caterpillars as to whether another plague occurs or not. The plague was not prejudicial to public health.

Perusal of the summary of visits by the sanitary inspectors in the main body of this Report shows the wide scope and variety of work undertaken.

In summing up it can be stated that the health of the general community was very good during the year. There was no outbreak of dangerous infectious disease. No maternal deaths occurred, whilst the small number of infants under one year of age made the infantile mortality rate about one third of that for England and Wales for the same year. As before, the chief causes of death were heart disease, cancer and vascular lesions of the nervous system. The average age at death, 72 years, was high. No deaths occurred of any of the infectious diseases cases notified. The intensive work of unearthing cases of tuberculosis continued throughout the year and it is noteworthy that deaths from this disease have decreased rapidly in recent years whilst the ages at death are now much later. The considerable wastage of young human life has been cut down and is likely to be diminished still further in future years. Tuberculosis is on the way out. A great deal of work was done by the Council in furthering schemes of sewage disposal, but it has been irritating to find various factors outside the Council's control which have held up the work of some schemes.

My thanks are due to the Health Committee for their kindness and encouragement during the year and to other officials for their help and courtesy.

I remain,

Yours obediently,

G. M. DAVIDSON LOBBAN,

M.B., Ch.B., D.P.H., F.R.S.I., etc.

Medical Officer of Health.

SECTION I

STATISTICS FOR THE AREA, 1953

Area (in acres)	..	..	..	..	..	..	64,216
Population (estimated)	..	..	..	..	..	..	18,840
Rateable Value as at 1st April, 1953	..	..	..	..	..	..	£159,000
Estimated Product of a Penny Rate 1953-54	..	..	..	..	..	..	£661 14 10

EXTRACTS FROM VITAL STATISTICS

<i>Live Births</i>				<i>Male</i>	<i>Female</i>	<i>Total</i>	<i>Rate per 1,000 population</i>
Legitimate ..	..	..	..	111	112	223	
Illegitimate ..	..	..	..	5	5	10	
						233	.. 12.37
Deaths ..	..	..	..	166	190	356	.. 18.89
							<i>Rate per 1,000 Live and Still Births</i>
Maternal Mortality	..	..	-		0	0	.. 0.00
							<i>Rate per 1,000 Live Births</i>
Infantile Mortality	..	..	1	1	2	2	.. 8.58

POPULATION

The Registrar-General's estimate of the Chailey Rural District population for the year 1953 was 18,840. The following table shows the annual population of the rural district for the past ten years, together with the numbers of births and deaths and the birth rates and death rates each year during the same period :—

<i>Year</i>	<i>Population</i>	<i>Births</i>	<i>Deaths</i>	<i>Birth Rate</i>	<i>Death Rate</i>
1944	16,630	309	220	18.58	13.22
1945	17,320	266	294	15.35	16.97
1946	18,410	308	240	16.73	13.03
1947	18,860	330	246	17.49	13.04
1948	20,080	315	252	15.68	12.54
1949	20,480	297	248	14.50	12.11
1950	20,340	285	243	14.01	11.95
1951	20,510	270	276	13.16	13.46
1952	19,540	238	244	12.18	12.48
1953	18,840	233	356	12.37	18.89

The estimated population figure for mid-1953 (18,840) shows a decrease of 700 on the previous year's total of 19,540. The figure of 19,540 for 1952 showed a reduction of 970 on the 1951 figure and was brought about by the transfer of part of the rural area to Brighton County Borough. The further reduction of 700 which is shown by the Registrar-General this year is probably due to the final correction of the adjustment made in the preceding year, together with any adjustment found to be necessary when the 1951 census figure was obtained.

It will be noted that the number of deaths during the year has risen very steeply, the highest figure for some years previous having been 276, which is very considerably less than the 1953 total of 356. This increase is a "paper" increase only and is due to the recent decision of the Registrar-General that deaths of persons in certain types of institutions shall be registered as being deaths of residents in that area, although in fact the persons concerned had not resided in the district prior to entering the institution. Many deaths of persons normally resident outside the Chailey Rural District area occur at Pouchlands Hospital and these are now, for the first time, included in the annual total. It must be expected, therefore, that the number of deaths recorded and ascribed to Chailey Rural District in future years will be considerably higher than has been the case in the past. The only method of arriving at the annual number of deaths of Chailey residents is to subtract the number of yearly deaths of non-residents who have died in institutions in the district from the gross total of annual deaths. In the case of 1953 the gross total was 356 and the number of deaths of non-residents was 86. This leaves 270 representing a crude death rate of Chailey residents of 14.33 per 1,000 population and a comparable death rate of 10.60 per 1,000 population.

BIRTH RATE

The crude birth rate for the year under review was 12.37 per 1,000 population, which is slightly higher than the figure of 12.18 for 1952. This is the first occasion since 1947 on which the birth rate for the district has not shown a decrease, and it is to be hoped that the improvement will be continued during the years to come. The easing of restrictions on house-building which is gradually becoming apparent will probably prove a factor in maintaining the birth rate at a higher level.

An area comparability factor of 1.12 is applicable to the crude birth rate. This factor is a compensating one for the purpose of securing a fair comparison with the birth rates of other areas. On applying the factor the comparable birth rate for the Chailey Rural District is 13.85 per 1,000 population. The birth rate for England and Wales for 1953 was 15.5.

DEATH RATE

The crude death rate for 1953 for the district was 18.89 per 1,000 population. As explained in a preceding paragraph, direct comparison with the rates for earlier years cannot be made as the basis of calculation has been altered by the Registrar-General.

Applying an area comparability factor of 0.74 for 1953 for the same reason as an area comparability factor was applied to the crude birth rate, a comparable death rate of 13.98 is arrived at. The death rate for England and Wales for 1953 was 11.4.

CAUSES OF DEATH

During the year there was a total of 356 deaths, i.e., 166 males and 190 females. The following table shows the causes of death :—

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Heart Disease	73	76	149
Cancer	33	25	58
Vascular Lesions of the Nervous System	10	30	40
Diseases of the Circulatory System other than Heart Disease	7	10	17
Pneumonia	6	19	25
Bronchitis	7	4	11
Influenza	6	4	10
Tuberculosis, respiratory	2	3	5
Accidents other than Motor Vehicle Accidents ..	5	—	5
Diabetes	1	2	3
Hyperplasia of Prostate	3	—	3
Motor Vehicle Accidents	3	—	3
Suicide	—	3	3
Leukaemia	2	—	2
Other Diseases of Respiratory System	—	2	2
Ulcer of Stomach and Duodenum	2	—	2
Congenital Malformations	—	2	2
Syphilitic Disease	—	1	1
Gastritis, Enteritis and Diarrhoea	—	1	1
Other defined and ill-defined diseases	6	8	14
	<hr/> 166	<hr/> 190	<hr/> 356

As is usually the case in the Chailey Rural District, the chief cause of death in 1953 was heart disease with 149 deaths. The disease causing the next greatest number of deaths was cancer with 58 deaths, followed by vascular lesions of the nervous system with 40 deaths.

The highest age at death was 96 years

The lowest age at death was 36 hours

The average age at death was 72 years

SPECIFIC CAUSES OF DEATH

Heart Disease and Diseases of the Circulatory System

Each year three main causes of death account for the greater part of the mortality in the town and, indeed, throughout the country, and it is of interest to see how regularly the number of deaths due to each of the causes assumes a similar proportion to the whole total. Comparing the number of deaths from the three main causes for the years 1951, 1952 and 1953 the following results are observed :—

	1951	1952	1953
Heart Disease	106	99	149
Cancer	44	35	58
Vascular Lesions of Nervous System ..	39	44	40

So far as heart disease and diseases of the circulatory system are concerned it is probable that this group of illnesses will always remain the major cause of death, as many of the cases of heart disease which prove fatal in old age are little more than the result of the heart wearing out. This effect can be postponed, but it is unlikely to be entirely obviated.

Cancer

The position with regard to cancer, the second of the major killers, is somewhat different. The root cause of the disease is not yet known, and it is to be hoped that if and when this is discovered a dramatic reduction in the number of deaths from this cause will be achieved. Although the ultimate goal has not yet been attained, much has been accomplished to reduce the fatality rate of the disease, and some forms of cancer which a few years ago would have been looked upon as certainly fatal are now operated upon successfully.

One of the most important points relating to cancer which can be driven home to all members of the community is that in any case of doubt or uncertainty a visit should be made to the doctor in order that if any form of cancer is present it may be discovered at the earliest possible moment.

Vascular Lesions of the Nervous System

Vascular lesions of the nervous system include cerebral haemorrhage, cerebral embolism and thrombosis, and other lesions. A total of forty deaths in Chailey Rural District was classified under this heading in 1953, ten being males and thirty females. Most of these deaths occur amongst elderly persons and are due to the degeneration which takes place in the blood vessels in persons of advanced age.

VITAL STATISTICS

Birth-rates, Death-rates, Analysis of Mortality, Maternal Mortality and Case-rates for Certain Infectious Diseases in the Year 1953. Provisional figures based on Quarterly Returns.

	England and Wales	160 C.B.s and Great Towns (including London)	160 Smaller Towns (Resident Pop. 25,000 to 50,000 at 1951 Census)	London Administra- tive County	Chailey 1953 (Population 19,540)
Rates per 1,000 Home Population					
Births : Live	15.5	17.0	15.7	17.5	12.37
Still	0.35	0.43	0.34	0.38	0.21
	22.4(a)	24.8(a)	21.4(a)	21.0(a)	16.9(a)
Deaths : All Causes..	11.4	12.2	11.3	12.5	18.89
Typhoid and Para- typhoid	0.00	0.00	—	—	—
Whooping Cough ..	0.01	0.01	0.00	0.00	0.00
Diphtheria	0.00	0.00	0.00	—	—
Tuberculosis	0.20	0.24	0.19	0.24	0.26
Influenza	0.16	0.15	0.17	0.15	0.53
Smallpox	0.00	0.00	0.00	—	—
Acute Poliomyelitis (including polio- encephalitis) ..	0.01	0.01	0.01	0.01	0.00
Pneumonia	0.55	0.59	0.52	0.64	1.33
Notifications (Corrected)					
Typhoid Fever ..	0.00	0.00	0.00	0.01	0.00
Paratyphoid Fever ..	0.01	0.01	0.01	0.01	0.00
Meningococcal Infec- tion	0.03	0.04	0.03	0.03	0.05
Scarlet Fever	1.39	1.50	1.44	1.02	0.58
Whooping Cough ..	3.58	3.72	3.38	3.30	9.50
Diphtheria	0.01	0.01	0.01	0.00	0.00
Erysipelas	0.14	0.14	0.13	0.12	0.21
Smallpox	0.00	0.00	0.00	—	—
Measles	12.36	11.27	12.32	8.09	19.64
Pneumonia	0.84	0.92	0.76	0.73	0.64
Acute Poliomyelitis (including Polio- encephalitis)					
Paralytic	0.07	0.06	0.06	0.07	—
Non-paralytic	0.04	0.03	0.04	0.03	—
Food Poisoning ..	0.24	0.25	0.24	0.38	0.21
Puerperal Pyrexia ..	18.23(a)	24.33(a)	12.46(a)	28.61(a)	—
Rates per 1,000 Live Births					
Deaths					
All causes under 1 year of age	26.8(b)	30.8	24.3	24.8	8.58(b)
Enteritis and Diar- rhoea under 2 years of age	1.1	1.3	0.9	1.1	—

(a) Per 1,000 Total (Live and Still) Births

(b) Per 1,000 related Live Births

Maternal Mortality in England and Wales

<i>Intermediate List No. and Cause</i>	<i>Number of Deaths</i>	<i>Rates per 1,000 Total (Live and Still) Births</i>	<i>Rates per million women aged 15-44</i>	<i>CHAILEY</i>
A115 Sepsis of Pregnancy, Child-birth and the Puerperium	68	0.10		} 0.00
A116 { Abortion with Toxaemia ..	7	0.01	1	
Other Toxaemias of Pregnancy and the Puerperium	166	0.24		
A117 Haemorrhage of Pregnancy and Childbirth	90	0.13		
A118 Abortion without mention of Sepsis or Toxaemia ..	30	0.04	3	
A119 Abortion with Sepsis ..	39	0.06	4	
A120 Other Complications of Pregnancy, Childbirth and the Puerperium	125	0.18		

SECTION II

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA

Public Health Facilities of the Local Authority

During the period under review the Medical Officer of Health for the Rural District of Chailey also acted as Medical Officer of Health for the Borough of Lewes and the Urban Districts of Newhaven and Seaford.

One Chief Sanitary Inspector and two Sanitary Inspectors carry out duties in the Rural District.

Laboratory Facilities

The Public Health Laboratory, established at the Royal Sussex County Hospital, Brighton, has proved of great assistance during the year.

The Laboratory has carried out for the Rural District, free of charge, the examination of sputum, laryngeal, nose and throat swabs, and has also undertaken the examination of milk and water. Altogether the Laboratory carried out eighty-nine different examinations for the rural district during the year under review. This service is extremely valuable both to your Medical Officer of Health and to the medical practitioners practising in the district. It is particularly useful in providing a certain means of discovering whether or not a person has been invaded by the infective organisms causing tuberculosis or other infections and is also of great use in detecting any impurities or infective organisms in milk, ice-cream or foodstuffs generally.

Ambulance Facilities

The provision of the ambulance service is the responsibility of the East Sussex County Council, which arranges for the two ambulances and one sitting case car stationed at Lewes to be available for the transfer of cases into hospital from this area, with the exception of cases from Wivelsfield, when the service stationed at Haywards Heath is used, from Ditchling, when the service stationed at Hurstpierpoint is implemented, and from South Heighton, Peacehaven, Tarring Neville, Piddinghoe and Telscombe, when the service stationed at Newhaven is used.

With the exception of the area served by the ambulance stationed at Newhaven, both infectious and non-infectious cases are conveyed in the same ambulances and arrangements are in being for the disinfection of ambulances, bedding, clothing, etc., after use for the transport of an infectious case. The Newhaven ambulance, however, is not available for the transport of infectious disease cases, but under the provisions of the Ambulance Scheme, ambulances from adjacent ambulance stations can be called upon, if required, for the conveyance of infectious disease cases. Generally, arrangements are made for any further calls received when all the ambulances of a particular station are out on duty to be dealt with by another station in the County Council's area.

The East Sussex County Council provides facilities for the transport of tuberculous patients.

Nursing in the Home

As in previous years, the East Sussex County Council, as empowered by Section 25 of the National Health Service Act, 1946, has arranged for this service to be provided by the East Sussex County Nursing Association through the District Nursing Associations.

Hospitals

The South East Metropolitan Regional Hospital Board is responsible for the provision of hospital accommodation. The accommodation available in the area remains materially the same as it was prior to the passing of the Act.

Clinics and Treatment Centres

The following is a list of clinics and treatment centres available during 1953 for residents of the district :—

<i>Description and Situation</i>	<i>Day and Time of Attendance</i>	<i>By Whom Provided</i>
Chest Clinic, Victoria Hospital Lewes	Monday and Friday, at 2.0 p.m. By appointment	Regional Hospital Board
Orthopaedic Clinic, Y.M.C.A., Lewes	Monday, Wednesday and Friday, 10 a.m. to 1 p.m. By Appointment	Mid-Sussex Hospital Board
Artificial Pneumothorax, Victoria Hospital, Lewes	Wednesday Women — 2.15 p.m. Men — 3.30 p.m.	Regional Hospital Board
Nervous Disorders Clinic, Victoria Hospital, Lewes	Every Tuesday at 2-4 p.m.	Regional Hospital Board

In addition to the above there are Infant Welfare Centres and Dental and Minor Ailment Clinics available for residents in the area.

Provisions for the Care of Mental Defectives

The East Sussex County Council deals with the Lunacy and Mental Deficiency Services in respect of patients outside Institutions. All Institutional care is the responsibility of the Regional Hospital Board.

SECTION III

SANITARY CIRCUMSTANCES AND SANITARY INSPECTION OF THE AREA

1. WATER SUPPLY

The Statutory Water Authorities supplying the several areas within the rural district continued as before, viz. :—

Chailey Rural District Council
Brighton County Borough Council
Lewes Borough Council
Newhaven and Seaford Water Company
Burgess Hill Water Company
Mid-Sussex Joint Water Board

Samples of water were taken by each of the Undertakings throughout the year and copies of the results have been received by the Council. All these showed that the quality of the water supplies throughout the area has been satisfactory.

Below is a copy of the Analyst's Report on a random sample taken from this Council's own Undertaking :

Sample taken from Offham Pumping Station on the 28th April, 1953, shows the following characteristics :—

Colour	None
Smell	None
Sediment	None

CHEMICAL ANALYSIS

					<i>Grains per gallon</i>	<i>Parts per million</i>
Total solids (dried at 100°C.)	..	..	..	..	20.0	
Solids (after ignition)	..	..	..	..	17.0	
Chlorine .. .. .	..	..	..	..	1.6	
Ammonia (free) .. .. .	..	..	..	..		.030
Ammonia (albuminoid) .. .. .	..	..	..	..		.036
Oxygen taken from permanganate in $\frac{1}{4}$ hour	..	..	..	..	Nil	
Oxygen taken from permanganate in 4 hours	..	..	..	..	Nil	
Nitrogen as Nitrates and Nitrites .. .. .	..	..	..	..	.23	
Nitrites .. .. .	..	..	..	..	Nil	
Hardness (total) .. .. .	..	..	..	..	16.2	
Hardness (after boiling) .. .. .	..	..	..	..	4.8	
Phosphates .. .. .	..	..	..	..	Nil	
Metallic impurity—Iron .. .. .	..	..	..	..	.01	
P.H.	7.5	..	..	..

BACTERIOLOGICAL EXAMINATION

The organisms per ml. which grew on Nutrient Agar in three days at 22°C. under aerobic conditions and were then visible to the naked eye as colonies were Nil

On Agar at blood temperature and under aerobic conditions colony was noticed after two days' incubation One

Probable number of Coli-Aerogenes organisms in 100 ml. of the original water Nil

Free Chlorine—0.1 p.p.m.

REPORT

Both chemically and bacteriologically this water is satisfactory, and I am of opinion, therefore, that it is perfectly safe for drinking purposes and suitable for a public supply.

R. F. WRIGHT,
Public Analyst.

During the year water mains were extended in the following localities :—

Sharpsbridge Lane	..	..	..	..	..	1,967	lin. yds.
North Common, Chailey	..	..	..	..	..	1,550	„
Highbridge, East Chiltington	..	..	..	..	..	1,030	„
Ringmer extension to Housing Site private	..	..	..	..	..	94	„
						<hr/> 4,641	„

Samples of water were taken from 14 private sources, two of which were found to be polluted, and as a result formal Notices were served resulting in 12 dwellings being connected to the Council's main.

In addition to these connections carried out by formal procedure there is still progress in the elimination of private supplies by the extension of water mains. Owners are generally ready and willing to connect properties immediately main water is available, and most of the improvements are effected by verbal recommendation.

The private supply to the village of Glynde was sampled during the year and it would appear that the trouble which caused concern last year has now been eliminated.

Negotiations with the Newhaven and Seaford Water Company concerning the laying of additional mains to augment the Council's supply made no progress during the year.

The Water Department and the Public Health Department have again worked in complete harmony.

SEWAGE DISPOSAL

Work was started on the sewer and sewage disposal plant for part of the Parish of Beddingham. The scheme will serve 10 new Council houses and 50 existing cottages.

The scheme for South Common, Chailey, was also started during the year, the sewer and sewage disposal works will serve some 35 existing cottages and a proposed Housing Site for 30 new houses. This scheme has been urgently needed for many years and will result in the abatement of a serious nuisance in the roadside ditch.

Tenders were accepted and a contract signed for the proposed scheme at Wivelsfield and work was commenced in January, 1954.

A Public Enquiry was held in December into a modified scheme for Plumpton designed in the first instance to serve existing and proposed Council housing sites, with provision for extension to serve the remainder of the village.

There has been no further progress in the scheme for the sewerage of Kingston. The need for such a scheme has become more urgent than ever due to the increase in private building. The chaotic conditions of drainage in this parish are such as to necessitate a virtual ban on further development in this area until adequate services are available.

In October, 1951, a Public Enquiry was held by the Minister into proposals submitted for the sewerage of Rodmell, where the need is extremely urgent. At the time of writing no decision has been given by the Minister. There is acute public distress in the parish at the delay. Constant complaints are received from the residents and the Parish Council concerning this delay.

Negotiations have taken place during the year with the Newhaven Urban District Council with a view to a joint scheme for the sewerage of the Parish of South Heighton jointly with parts of the adjoining urban area. Good progress has been made, and it is hoped that the scheme will soon be submitted to the Minister.

During the year the work on two small disposal plants to serve small groups of houses has been put in hand; this additional maintenance work added to the work to be entailed in maintaining the two small plants now in course of construction led to a review of the system of maintenance. It was decided that a greater degree of mobility was required under conditions now obtaining, and the purchase of an extra van was authorised. As now reorganised the maintenance of sewage disposal plants is as follows:—

Six large village works each with one full-time workman;

41 smaller works, including Housing Sites maintained by 3 men;

One Land Rover, one 10 h.p. truck and one motor cycle are in use full time together with trailer, trailer pumps and grass-cutting equipment. It is only with the aid of sufficient transport that such a number of plants can be properly maintained at a reasonable cost.

PUBLIC CLEANSING

The once-fortnightly collection of house refuse was continued throughout the year.

Refuse is disposed of as before by controlled tipping on a site at Lewes by arrangement with the Lewes Borough Council. This joint scheme is most economical and has advantages to both the Authorities concerned.

Very little wastepaper was salvaged for sale during the year.

CESSPOOL EMPTYING SERVICE

This service was continued during the year with the aid of 3 machines, each of 750 gallons capacity.

The total number of tanks or cesspools emptied during the year amounted to 2,808 with a total of 5,984 loads.

Approximately 140 tanks and/or cesspools are serviced at regular intervals varying from one week to six months, including the regular emptying of the tanks to Council-owned small sewage disposal plants.

A new short-wheel-based vehicle was put into service during the year. It has, in the short time it has been in service, proved to be more manoeuvrable and more suitable for soft ground than the long-wheel-base machines.

TRANSPORT DEPARTMENT

Refuse collecting vehicles, cesspool emptier vans and trucks and all other machines, mobile or stationary, are maintained by the Transport Department.

DUSTBINS

The Council's dustbin hire scheme continues to operate most satisfactorily, and with its help the Council is able to achieve without difficulty its object of ensuring that each dwelling is provided with suitable and sufficient dustbins.

The figures for the year are as follows:—

No. of Formal Notices served	7
No. of Properties concerned	7
No. of bins provided by owners	9
No. of bins provided by Council:—	
(a) at owner's request	2
(b) in default	3
No. of bins supplied to owners on request without service of formal notice	81
No. of notices outstanding at end of year	46

HOUSING

During the year only 29 Notices requiring repairs to houses were served, and in no case was a Statutory Notice necessary. The pleasing feature of the work in Housing during the year was steady improvement by way of recondition.

Thirty-nine dwellings were brought to a high standard of repair with appointments to compare favourably with the standard of new Council houses. Most of these dwellings were classified in the Rural Housing Survey as Category 5 or near, and suitable for demolition. Of these approximately half are occupied by agricultural workers, 12 being assisted by Improvement Grants under the Housing Act, 1949.

Nearly all this work has been carried out by informal representation and personal contact with the owners without the service of Notices. It is felt that in a Rural District, such as this, much more can be achieved in the improvement of the housing conditions by this means than by formal approach. Much of this work has been done by taking advantage of the opportunities presented when property becomes vacant and particularly where persons are rehoused by the Council.

There is a fair prospect of a considerable increase in this form of housing activity in the next few years particularly if, as seems probable, greater use can be made of Improvement Grants.

TENTS, VANS AND SHEDS

Work on the first part of the scheme to develop the 20 acres of land purchased at Rushey Hill, Peacehaven, was put in hand during the year, and it is expected that caravans will be accommodated on part of the site in 1954.

The Council are eager to make this a first-class site to accommodate 120 caravans, but the work cannot be completed until the Minister gives approval to the necessary expenditure.

In 1953 12 new licences were issued authorising land to be used for caravan sites having a total of 17 vans. At the end of the year there remained 30 sites licensed to accommodate 66 caravans.

Constant supervision is necessary particularly in the locality of Peacehaven and Telscombe Cliffs to prevent the thousands of vacant building plots being used as unauthorised sites.

SLAUGHTERING

The slaughtering of horses for human consumption continued during the year at one slaughterhouse, 72 animals being killed, all of which were inspected.

One case of anthrax in an animal was notified at a licensed Knacker's Yard.

MILK AND DAIRIES

Visits of inspection of dairy premises were further reduced during the year due to the changes which have taken place in the milk industry. Twenty-nine visits of inspection only were made. Premises in all instances were well maintained.

PETROLEUM ACTS

As a result of investigation as to loss of petrol and the consequent discovery of a leaking tank, the Council resolved that all licence holders in respect of storage tanks installed before 1940 should be required to have their tanks retested—during the year 49 such tanks, representing approximately half the licence holders, were tested. In six cases manhole plates were found to leak, one vent pipe found to be broken and two tanks leaking. It will be a condition of next year's licence that all tanks not so tested must satisfy the test within three months.

KEEPING OF ANIMALS

A few complaints were received concerning the keeping of pigs by small holders, and these were all dealt with by informal means.

FOOD AND DRUGS ACT

Routine visits of inspection of food premises and eating establishments numbered 241 during the year. Informal notices were served in four instances requiring cleaning, redecoration of food premises and in one persistent case only was it necessary to ask for authority to take legal proceedings. Before proceedings could be taken, however, the offender disappeared from the district.

The following articles of food were certified as being unfit for human consumption :—

48 tins Peaches
16 tins Danish Pork Brawn
75 $\frac{3}{4}$ lb. Beef

Applications for registration for the sale, manufacture and storage of ice cream were granted in three instances and two transfers were made.

BROWN TAIL MOTH

Early in May vigorous and numerous complaints were received from residents in the Peacehaven and Telscombe Cliffs area concerning nuisance and inconvenience caused by an excessively large number of caterpillars which were hatching out daily. These caterpillars were found principally on bramble and thorn bushes which exist in the many vacant spaces between dwelling houses which are typical of the parish. A quick survey showed that the areas affected totalled some 200 acres, most of which was scrub land, consisting of gorse, bramble and thorn. The caterpillar was identified as that of the Brown Tail Moth (*Euproctis Chrysorrhoea*) which appeared to be indigenous in this locality, and had suddenly built up into vast numbers. By the middle of May

the creatures appeared to have defoliated the areas of bushes on which they were bred and were moving on in search of further food. They crossed roads and houses by the thousands, and in some areas it became impossible for householders to leave any windows open without incurring the risk of the room being invaded.

As the species was not a scheduled agricultural pest, no help was forthcoming from the Agricultural Department. Accordingly the Council obtained consent from the Ministry of Housing and Local Government to incur expenditure on the control measures. Immediately consent was obtained operations consisting of cutting and burning of bushes and spraying of bushes and verges were commenced.

The worst affected areas were treated and relief obtained in the first month of operations. Spraying continued at various sites so long as the life cycle of the caterpillar allowed it to remain active. By the end of July the plague was over for the year.

A subsequent survey showed that unless further treatment is given, a further plague is likely to develop during spring and early summer next year.

Control measures this year cost approximately £600, and it is probable that a similar expenditure will be required to carry out adequate preventive measures in the early spring of 1954.

SUMMARY OF VISITS

House Inspections under Housing Regulations	24
Other Inspections of Houses not included above	158
Visits in connection with Nuisances	126
Visits to Slaughter Houses, Butchers' Shops and Food Premises ..	240
Visits to Dairies and Milk Premises	29
Visits re Drainage	841
Drains Tested	373
Samples taken for analysis:—	
Milk	4
Water	33
Visits in connection with Water Supplies	55
Visits in connection with Infectious Disease	16
Rooms fumigated	55
Visits to Sewage Outfall Works and Sewers	395
Visits to Refuse Tips and in connection with Refuse Collection ..	40
Visits under Petroleum Acts	124
Visits in connection with Salvage	10
Visits under Factories' and Workshops' Acts	55
Visits in connection with Residual Services	12
Visits in connection with Tents, Vans and Sheds	104
Visits in connection with Shops Acts	33
Miscellaneous Visits	595

RODENT CONTROL

Visits for purposes of Survey	534
Visits for purposes of Treatment	320
New infestations found since	54
Infestations cleared	52
Estimated number of Rats killed	1,051
Estimated number of Mice killed	305

FACTORIES ACT, 1937

Inspections :—

<i>Premises</i>	<i>No. on Register</i>	<i>Inspections</i>	<i>No. of written Notices</i>	<i>Occupiers Prosecuted</i>
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	25	25	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	57	31	—	—
Totals	82	56	—	—

Cases in which defects were found :—

Number of cases in which defects were :

<i>Particulars</i>	<i>Found</i>	<i>Remedied</i>	<i>Referred to H.M. Inspector</i>
Want of Cleanliness	4	4	—
Sanitary Conveniences—Unsuitable or defective	1	1	—
Other offences against the Act (not including offences relating to Out-work)	—	—	—
Inadequate Ventilation	—	—	—
Inefficient Drainage of Floors	—	—	—

LICENCES ISSUED

To Store Petrol	71
To Store Cellulose	4
To Slaughter Animals	5
To Use Premises as Slaughterhouses	4
To Use Premises as Knacker's Yard	1
For Moveable Dwellings	15
Dealer's Licence to use designation "Pasteurised"	9
Dealer's Licence to use designation "Tuberculin Tested"	13
Dealer's Licence to use designation "Sterilised"	3
Dealer's Supplementary Licence for the Sale of "Pasteurised" Milk	6
Dealer's Supplementary Licence for the Sale of "Tuberculin Tested" Milk	9
Dealer's Supplementary Licence for the Sale of "Sterilised" Milk	2
Pet Animals Act, 1951	1

SALVAGE SALES

	<i>Tons</i>	<i>Cwts.</i>	<i>Qrs.</i>	<i>Lbs.</i>		<i>£</i>	<i>s.</i>	<i>d.</i>
Mixed Wastepaper	33	13	3	0	..	161	6	0
Textiles		13	2	0	..	16	4	3
Mixed Metals	2	17	2	6	..	19	7	2
	37	4	3	6	..	£196	17	5

SECTION IV

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

INCIDENCE OF NOTIFIABLE INFECTIOUS DISEASES (excluding Tuberculosis) DURING THE YEAR 1953			
<i>Disease</i>	<i>Cases Notified</i>	<i>Cases Admitted to Hospital</i>	<i>Deaths</i>
Measles	370	—	—
Whooping Cough	179	—	—
Pneumonia	12	2	—
Scarlet Fever	11	1	—
Erysipelas	4	—	—
Food poisoning	4	—	—
Meningococcal Infection ..	1	—	—
Dysentery	1	—	—
Total ..	582	3	—

Measles

Three hundred and seventy cases of measles were notified in the Rural District during 1953. This represents 63.6 per cent. of the total number of notifications of infectious disease received during the year. The year was one of fairly heavy incidence and these occur every two or three years in the case of measles. All of the cases made rapid and uneventful recoveries.

Measles mainly affects children under seven years of age, and before the introduction of penicillin and the sulpha-drugs broncho-pneumonia often developed as a fatal complication. Since the use of these drugs, however, the number of deaths has been reduced to very small proportions, and the complications, which in the past have often had a lasting detrimental effect on the patient's ears or eyes, are now nearly always avoided.

Whooping Cough

Of the total number of 582 cases of infectious disease notified in Chailey Rural District during 1953, 179 or 30.8% were of whooping cough. None of these cases were of sufficient severity to merit admission to hospital. Although the district has been lucky in that only mild cases of whooping cough occurred, it must be remembered that the illness can be a very dangerous one, especially in the case of very young children. Throughout the country the case fatality of whooping cough is about five times that of measles.

For a number of years efforts have been made to develop a combined vaccine which offers protection against both diphtheria and whooping cough, and several are now available which have been proved to be satisfactory.

Arrangements are being completed to make one of these combined preparations available throughout the district, and it is to be hoped that within a very few years a case of whooping cough will be the rarity that diphtheria has now become.

Pneumonia

Twelve cases of pneumonia were notified during the year, two of which were admitted to hospital. All cases notified made satisfactory recoveries.

Scarlet Fever

Eleven cases of scarlet fever were notified in the rural district during 1953, one of which was admitted to hospital. All made satisfactory and uneventful recoveries. It is satisfactory to note that the total number of cases notified in the district during 1953 was five less than the total of sixteen for the preceding year.

Early recognition of the disease and immediate isolation of the patient are very important as the period of infectivity begins at the earliest stage of an attack. A daily dose of a sulphonamide drug, given under medical supervision, will provide protection for the majority of persons exposed to scarlet fever infection. This, however, does not obviate the necessity for appropriate precautions, such as the isolation of the patient, exclusion of contacts from school, and the exclusion of infected persons from handling milk and milk products.

Erysipelas

Four cases of erysipelas were notified in 1953, all of which were treated at home and made uneventful recoveries. Prior to the use of chloromycetin and the sulphonamide drugs many cases of erysipelas resulted in a long and critical illness and death frequently ensued. Few deaths now occur due to the disease and, generally speaking, the severity of the illness is greatly reduced and a cure is effected much more rapidly than was the case in the past.

Food Poisoning

Four cases of food poisoning occurred in the rural district during 1953. Two of the cases occurred at Offham during June and the other two at Newick in September. On each occasion the cases were brought to notice so long after the foodstuff causing the trouble had been consumed and the first symptoms of poisoning had manifested themselves that it was impossible to trace the infected article of food. All the cases recovered quickly under medical treatment.

Food poisoning by staphylococcal bacteria is probably the most common form of food poisoning. The bacteria, usually of human origin, multiply in the food infected, producing a toxin which is the cause of the poisoning. The most common vehicles of the toxin are custard-filled pastry, processed meats and pastes.

Routine examination of employees who prepare food at work places, and the exclusion of those suffering from skin infections, together with the prompt refrigeration of sliced and chopped meats, pastes, and of custard and cream

fillings, in order to avoid multiplication of any staphylococci accidentally introduced would, with the filling of pastries immediately before sale, or adequate heat treatment of the finished products, do much to lessen the number of cases of food poisoning.

Meningococcal Infection

One case of meningococcal infection, that of a male aged 31 years, occurred in the rural district during February of 1953. An uneventful recovery was made.

Dysentery

The one case of dysentery which was notified in the rural district during 1953 was that of an infant girl aged two months and occurred in an institution. It says much for the high standards of hygiene and food preparation observed that no further case was recorded. An uneventful recovery was made.

General

Of the total number of 582 cases of infectious disease which were notified in the Chailey Rural District during 1953, 549, or 94.3 per cent., were cases of measles or whooping cough. Although, unfortunately, it is not yet possible to give any form of preventive treatment against measles that is effective for more than a very short while, the vaccines available for the prevention of whooping cough are becoming increasingly effective. The control of this major scourge may result in the reduction of the incidence of infectious disease in this country by very nearly half, and it is encouraging to learn that it is more than probable that the day when this occurs is by no means remote.

SECTION V

TUBERCULOSIS

In 1953 thirteen cases of pulmonary tuberculosis and one case of non-pulmonary tuberculosis were notified, whilst during the year there were five deaths from pulmonary tuberculosis and none from non-pulmonary tuberculosis. Details are given in the following table :—

1953—NEW CASES AND MORTALITY											
AGE PERIODS				NEW CASES				DEATHS			
				Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
				M	F	M	F	M	F	M	F
0	..	..	..	—	—	—	—	—	—	—	—
1	..	..	..	—	—	—	—	—	—	—	—
5	..	..	..	—	2	—	—	—	—	—	—
10	..	..	..	—	—	—	—	—	—	—	—
15	..	..	..	—	1	—	1	—	—	—	—
20	..	..	..	2	2	—	—	—	—	—	—
25	..	..	..	—	2	—	—	—	1	—	—
35	..	..	..	1	—	—	—	—	—	—	—
45	..	..	..	1	1	—	—	2	—	—	—
55	..	..	..	—	1	—	—	—	2	—	—
65 and upwards	..	..	..	—	—	—	—	—	—	—	—
Totals				4	9	—	1	2	3	—	—

Details of deaths from Pulmonary Tuberculosis :—

Male aged 49 years	..	Died 11th February, 1953
Female aged 62 years	..	Died 11th February, 1953
Female aged 55 years	..	Died 3rd March, 1953
Male aged 49 years ..	..	Died 6th April, 1953
Female aged 34 years	..	Died 7th November, 1953

The five deaths from pulmonary tuberculosis which occurred in the Rural District during 1953 show a death rate of only 0.26 per 1,000 population. As no death occurred due to non-pulmonary tuberculosis the rate for pulmonary and non-pulmonary tuberculosis combined remains the same, namely 0.26 per 1,000 compared with a rate of 0.20 per 1,000 for England and Wales.

Although it is extremely satisfactory to reflect that advances in the battle against tuberculosis are being made in so many fields, it is unfortunate that the

position is still unsatisfactory so far as one of the most important factors is concerned, namely, the elimination of unsatisfactory housing conditions. Dry, comparatively spacious and well-lighted housing accommodation will often enable a person to resist the efforts of the disease to obtain a footing, while on the contrary, damp, dark and cramped rooms, especially sleeping quarters, will lower a person's resistance and make him or her an easy prey to the attacks of the bacilli. It is unfortunate that it has not been possible for a number of years past to launch, either in the Rural District or in the country as a whole, any form of mass attack against bad housing conditions, but there are encouraging signs that restrictions are gradually being withdrawn, and no doubt every opportunity will be taken to re-house as soon as possible those people in the Rural District whose health may be jeopardised by their present unsatisfactory living conditions.

